

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Northern District of: Georgia
(State)

Case number (if known) _____

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport) Bring your picture identification to your meeting with the trustee.	First name: Cheyenne Middle name: Paige Last name: Wiler Suffix (Sr., Jr., II, III):	First name Middle name Last name Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years Include your married or maiden names.	First name: Cheyenne Middle name: P Last name: Wiler First name Middle name Last name	First name Middle name Last name First name Middle name Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	XXX - XX- 4637 OR 9 XX - XX-	XXX - XX- OR 9 XX - XX-

Debtor 1 First Name	Paige	Wiler	Case number (if known)																							
About Debtor 1:																										
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	<input checked="" type="checkbox"/> I have not used any business names or EINs. <hr/> Business name <hr/> Business name <hr/> Include trade names and doing business as names <hr/> EIN <hr/> EIN																									
About Debtor 2 (Spouse Only in a Joint Case):																										
	<input type="checkbox"/> I have not used any business names or EINs. <hr/> Business name <hr/> Business name <hr/> EIN <hr/> EIN																									
5. Where you live																										
<p>509 Vinings Pkwy</p> <table border="0"> <tr> <td>Number</td> <td>Street</td> </tr> <tr> <td colspan="2"><hr/></td> </tr> <tr> <td>Smyrna</td> <td>Georgia</td> <td>30080</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td colspan="3"><hr/>Cobb</td> </tr> <tr> <td colspan="3"><hr/>County</td> </tr> </table> <p>If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.</p> <table border="0"> <tr> <td>Number</td> <td>Street</td> </tr> <tr> <td colspan="2"><hr/></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> </table>				Number	Street	<hr/>		Smyrna	Georgia	30080	City	State	Zip Code	<hr/> Cobb			<hr/> County			Number	Street	<hr/>		City	State	Zip Code
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<p>If Debtor 2 lives at a different address:</p> <table border="0"> <tr> <td>Number</td> <td>Street</td> </tr> <tr> <td colspan="2"><hr/></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td colspan="3"><hr/>County</td> </tr> </table> <p>If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.</p> <table border="0"> <tr> <td>Number</td> <td>Street</td> </tr> <tr> <td colspan="2"><hr/></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> </table>				Number	Street	<hr/>		City	State	Zip Code	<hr/> County			Number	Street	<hr/>		City	State	Zip Code						
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City	State	Zip Code																								
6. Why you are choosing this district to file for bankruptcy																										
<p>Check one:</p> <p><input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. §§ 1408.)</p> <hr/> <hr/> <hr/> <hr/>																										
<p>Check one:</p> <p><input type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. §§ 1408.)</p> <hr/> <hr/> <hr/> <hr/>																										

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under	<i>Check one.</i> (For a brief description of each, see <i>Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy</i> (Form B2010)). Also, go to the top of page 1 and check the appropriate box.
	<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13
8. How you will pay the fee	<input checked="" type="checkbox"/> I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. <input type="checkbox"/> I need to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals to Pay Your Filing Fee in Installments</i> (Official Form 103A). <input type="checkbox"/> I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.
9. Have you filed for bankruptcy within the last 8 years?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. District _____ When _____ Case number _____ District _____ When _____ Case number _____ District _____ When _____ Case number _____ MM / DD / YYYY
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Debtor _____ Relationship to you _____ District _____ When _____ Case number, if known _____ Debtor _____ Relationship to you _____ District _____ When _____ Case number, if known _____ MM / DD / YYYY
11. Do you rent your residence?	<input checked="" type="checkbox"/> No. Go to line 12. <input type="checkbox"/> Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? <input checked="" type="checkbox"/> No. Go to line 12. <input type="checkbox"/> Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

- No. Go to Part 4.
 Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City State Zip Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- No. I am not filing under Chapter 11.
 No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
 Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

- No.
 Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City State Zip Code

Debtor 1 Cheyenne
First Name

Paige
Middle Name

Wiler
Last Name

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

- Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

- Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
First Name Middle Name Last Name

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	<p>16a. Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."</p> <p><input type="checkbox"/> No. Go to line 16b.</p> <p><input checked="" type="checkbox"/> Yes. Go to line 17.</p> <p>16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.</p> <p><input type="checkbox"/> No. Go to line 16c.</p> <p><input type="checkbox"/> Yes. Go to line 17.</p> <p>16c. State the type of debts you owe that are not consumer debts or business debts.</p> <hr/>		
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<p><input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.</p> <p><input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?</p> <p><input type="checkbox"/> No.</p> <p><input type="checkbox"/> Yes.</p>		
18. How many creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input checked="" type="checkbox"/> \$100,001-\$500,000 <input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$1,000,001-\$10 million <input type="checkbox"/> \$10,000,001-\$50 million <input type="checkbox"/> \$50,000,001-\$100 million <input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> \$500,000,001-\$1 billion <input type="checkbox"/> \$1,000,000,001-\$10 billion <input type="checkbox"/> \$10,000,000,001-\$50 billion <input type="checkbox"/> More than \$50 billion
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input checked="" type="checkbox"/> \$100,001-\$500,000 <input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$1,000,001-\$10 million <input type="checkbox"/> \$10,000,001-\$50 million <input type="checkbox"/> \$50,000,001-\$100 million <input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> \$500,000,001-\$1 billion <input type="checkbox"/> \$1,000,000,001-\$10 billion <input type="checkbox"/> \$10,000,000,001-\$50 billion <input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you	<p>I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.</p> <p>If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.</p> <p>If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.</p>		
	<small>/s/ Cheyenne Wiler</small> <small>Signature of Debtor 1</small>		<small>Signature of Debtor 2</small>
Executed on <u>10/24/2017</u> <small>MM / DD / YYYY</small>	Executed on <u> </u> <small>MM / DD / YYYY</small>		

Debtor 1 Cheyenne _____
First Name Paige _____
Middle Name Wiler _____
Last Name Case number (if known) _____

**For your attorney, if you
are represented by one** I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about
eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the
relief available under each chapter for which the person is eligible. I also certify that I have delivered to the
debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I
have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**If you are not
represented by an
attorney, you do not
need to file this page.**

/s/ Francis Laryea
Signature of Attorney for Debtor

Date

10/24/2017

MM / DD / YYYY

Francis Laryea
Printed name

Semrad Law Firm

Firm name

303 Perimeter Center North

Street

Suite 201

Atlanta
City

Georgia
State

30346
Zip Code

Contact phone

Email address

flaryea@semradlaw.com

984395
Bar number

Georgia
State

Fill in this information to identify your case:

Debtor 1	Cheyenne	Paige	Wiler
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern	District of Georgia	
Case number (if known)			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
608 Forest Hills Number Street	From 05/2014 To 05/2015	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
Atlanta Georgia 30339 City State Zip Code		Number Street	From _____ To _____
4317 Round Hill Drive Number Street	From 05/2015 To 11/2016	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
Chesterfield Virginia 23832 City State Zip Code		Number Street	From _____ To _____
		City State Zip Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips \$15000.00 <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business	_____
For last calendar year: (January 1 to December 31, 2016) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business	_____
For the calendar year before that: (January 1 to December 31, 2015) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips \$2000.00 <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business	_____

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Child Support Income estimated \$18,000.00 Rental Income \$3,500.00	_____	_____
For last calendar year: (January 1 to December 31, 2016) YYYY	tax refund \$3,000.00 Child Support Income estimated \$12,000.00 Rental Income \$4,200.00	_____	_____
For the calendar year before that: (January 1 to December 31, 2015) YYYY	Child Support Income estimated \$12,000.00 Rental Income \$4,200.00	_____	_____

Debtor 1 Cheyenne _____ Paige _____ Wiler _____ Case number (if known) _____
 First Name Middle Name Last Name

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name	_____	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
Number Street	_____	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
City State Zip Code	_____	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
Creditor's Name	_____	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
Number Street	_____	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
City State Zip Code	_____	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
Creditor's Name	_____	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
Number Street	_____	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
City State Zip Code	_____	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name	_____	_____	_____	
Number Street	_____	_____	_____	
City State Zip Code	_____	_____	_____	
Insider's Name	_____	_____	_____	
Number Street	_____	_____	_____	
City State Zip Code	_____	_____	_____	

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment <i>Include creditor's name</i>
Insider's Name	_____	_____	_____	
Number Street	_____	_____	_____	
City State Zip Code	_____	_____	_____	
Insider's Name	_____	_____	_____	
Number Street	_____	_____	_____	
City State Zip Code	_____	_____	_____	

Debtor 1 Cheyenne _____ Paige _____ Wiler _____ Case number (if known) _____
 First Name Middle Name Last Name

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Describe the action the creditor took	Date action was taken	Amount

Creditor's Name _____

Number Street _____

Last 4 digits of account number: XXXX-

City _____ State _____ Zip Code _____

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Describe the gifts	Dates you gave the gifts	Value

Person to Whom You Gave the Gift _____

Number Street _____

City _____ State _____ Zip Code _____

Person's relationship to you _____

Person to Whom You Gave the Gift _____

Number Street _____

City _____ State _____ Zip Code _____

Person's relationship to you _____

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
First Name Middle Name Last Name

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name _____ _____ _____	_____	_____	_____
Number Street _____	_____	_____	_____
City _____ State _____ Zip Code _____	_____	_____	_____

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
_____	_____	_____	_____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Retainer Fee - 500.00 _____	10/24/2017	\$500.00 _____
1st Credit Counseling Course - 9.76 _____	10/24/2017	\$9.76 _____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Debtor 1 Cheyenne _____ Paige _____ Wiler _____ Case number (if known) _____
 First Name Middle Name Last Name

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid _____

Number Street _____

City _____ State _____ Zip Code _____

Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer _____

Number Street _____

City _____ State _____ Zip Code _____
 Person's relationship to you _____

Person Who Received Transfer _____

Number Street _____

City _____ State _____ Zip Code _____
 Person's relationship to you _____

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?

(These are often called asset-protection devices.)

No

Yes. Fill in the details.

Name of trust _____

Description and value of the property transferred	Date transfer was made

Debtor 1 Cheyenne _____ Paige _____ Wiler _____ Case number (if known) _____
 First Name Middle Name Last Name

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
CHASE - CC Person Who Was Paid P.O. BOX 15298 Number Street	XXXX-2567	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	06/2017 \$ 50.00
WILMINGTON Delaware 19850 City State Zip Code	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	_____
Person Who Was Paid Number Street City State Zip Code			

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State Zip Code	Name Number Street City State Zip Code	<input type="checkbox"/> No <input type="checkbox"/> Yes

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility Number Street City State Zip Code	Name Number Street City State Zip Code	<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No
 Yes. Fill in the details.

Where is the property?	Describe the contents	Value
<input type="text" value="NumberStreet"/> <input type="text"/>		<input type="text"/>
<input type="text" value="City"/> <input type="text" value="State"/> <input type="text" value="Zip Code"/>		

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
 - *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
 - *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No
 Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Governmental unit		
Number Street		
City	State	Zip Code

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
<hr/>		
Governmental unit		
<hr/>		
Number Street		
<hr/>		
City	State	Zip Code

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
First Name Middle Name Last Name

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No
 Yes. Fill in the details.

Case title	Court or agency	Nature of the case	Status of the case
_____	_____	_____	<input type="checkbox"/> Pending
Case number	Court Name NumberStreet	_____	<input type="checkbox"/> On appeal
_____	City State Zip Code	_____	<input type="checkbox"/> Concluded

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street	_____	EIN:
City State Zip Code	Name of accountant or bookkeeper	Dates business existed
From _____ To _____	_____	From _____ To _____
Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street	_____	EIN:
City State Zip Code	Name of accountant or bookkeeper	Dates business existed
From _____ To _____	_____	From _____ To _____
Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street	_____	EIN:
City State Zip Code	Name of accountant or bookkeeper	Dates business existed
From _____ To _____	_____	From _____ To _____

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
First Name Middle Name Last Name

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued

Name _____ MM/DD/YYYY _____

Number Street _____

City _____ State _____ Zip Code _____

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X

/s/ Cheyenne Wiler
Signature of Debtor 1

X

Signature of Debtor 2

Date 10/24/2017

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Debtor 1 Cheyenne _____
First Name Paige _____
Middle Name Wiler _____
Last Name Case number (if known) _____

Additional Page

5 Did you receive any other income during this year or the two previous calendar years?

Debtor 1	Debtor 2
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)

Settlement 3000.00

For last calendar year:
(January 1 to December 31, 2016)
YYYY

Fill in this information to identify your case:

Debtor 1	Cheyenne	Paige	Wiler
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of Georgia (State)	
Case number (If known)			

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2

Yes. Where is the property?

1.1

Street address, if available, or other description

4317 Round Hill Drive

Number Street

Chesterfield Virginia 23832

City State Zip Code

Chesterfield

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?
\$178300.00 \$178300.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

Check if this is community property
(see instructions)

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.2

Street address, if available, or other description

Number Street

City State Zip Code

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property
(see instructions)

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Debtor 1	Cheyenne First Name	Paige Middle Name	Wiler Last Name	Case number (if known)
1.3 Street address, if available, or other description				What is the property? Check all that apply.
				<input type="checkbox"/> Single-family home <input type="checkbox"/> Duplex or multi-unit building <input type="checkbox"/> Condominium or cooperative <input type="checkbox"/> Manufactured or mobile home <input type="checkbox"/> Land <input type="checkbox"/> Investment property <input type="checkbox"/> Timeshare <input type="checkbox"/> Other _____
Number	Street			Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
City	State	Zip Code		
				Current value of the entire property? _____ Current value of the portion you own? _____
				Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. _____
				Check if this is community property (see instructions) <input type="checkbox"/>
2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.				\$178300.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
 Yes

3.1 Make _____

Model: _____

Year: _____

Approximate mileage: _____

Other information: _____

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? _____ **Current value of the portion you own?** _____

3.2 Make _____

Model: _____

Year: _____

Approximate mileage: _____

Other information: _____

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? _____ **Current value of the portion you own?** _____

Debtor 1	Cheyenne First Name	Paige Middle Name	Wiler Last Name	Case number (if known)
3.3	Make Model: Year: Approximate mileage:			Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Other information:			
3.4	Make Model: Year: Approximate mileage:			Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Other information:			
4	Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
4.1	Make Model: Year: Approximate mileage:			Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Other information:			
4.2	Make Model: Year: Approximate mileage:			Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Other information:			
5.	Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here 			

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No

Yes. Describe... Household Goods and Furnishings

\$800.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music

No

Yes. Describe... Electronics

\$250.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe...

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe...

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe...

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe... Clothes and Shoes

\$500.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe... Jewelry

\$500.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe...

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Describe...

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$2050.00

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 4: **Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes

Cash:

\$2000.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes

Institution name:

17.1. Checking account: Citizens Trust Bank \$3500.00

17.2. Checking account: PNC Bank \$20.00

17.3. Savings account: _____

17.4. Savings account: _____

17.5. Certificates of deposit: _____

17.6. Other financial account: _____

17.7. Other financial account: _____

17.8. Other financial account: _____

17.9. Other financial account: _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific information about them

Name of entity

% of ownership:

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
 Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about Issuer name:
 them.....

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately.

Type of account:	Institution name:
401(k) or similar plan:	_____
Pension plan:	_____
IRA:	_____
Retirement account:	_____
Keogh:	_____
Additional account:	_____
Additional account:	_____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes....

Electric:	Institution name:
Gas:	_____
Heating oil:	_____
Security deposit on rental unit:	The Atlantic Vinings
Prepaid rent:	\$1250.00
Telephone:	_____
Water:	_____
Rented furniture:	_____
Other:	_____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes....

Issuer name and description:	_____
_____	_____
_____	_____
_____	_____

Debtor 1	Cheyenne First Name	Paige Middle Name	Wiler Last Name	Case number (if known)
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).			
	<input checked="" type="checkbox"/> No Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): <input type="checkbox"/> Yes.... <hr/> <hr/> <hr/>			
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Describe... <hr/>			
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Describe... <hr/>			
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Describe... <hr/>			
Money or property owed to you?			Current value of the portion you own?	
			Do not deduct secured claims or exemptions.	
28.	Tax refunds owed to you			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Give specific information about them, including whether you already filed the returns and the tax years..... 			Federal: \$0.00 State: \$0.00 Local: \$0.00
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Give specific information..... 			Alimony: \$0.00 Maintenance: \$0.00 Support: \$0.00 Divorce settlement: \$0.00 Property settlement: \$0.00
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Describe... <hr/>			

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company
of each policy and list its value.....

Company name: _____

Beneficiary: _____

Surrender or refund value: _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Yes. Describe... _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe... _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Yes. Describe... _____

35. Any financial assets you did not already list

No

Yes. Describe... _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here ►

\$6770.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions

38. Accounts receivable or commissions you already earned

No

Yes. Describe... _____

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No

Yes. Describe... _____

Debtor 1	Cheyenne First Name	Paige Middle Name	Wiler Last Name	Case number (if known)
40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Describe... <hr/>				
41. Inventory				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Describe... <hr/>				
42. Interests in partnerships or joint ventures				
<input checked="" type="checkbox"/> No		Name of entity:	% of ownership:	
<input type="checkbox"/> Yes. Give specific information about them		 <hr/> <hr/> <hr/> <hr/>	 <hr/> <hr/> <hr/>	 <hr/> <hr/> <hr/>
43. Customer lists, mailing lists, or other compilations				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?				
<input type="checkbox"/> No				
<input type="checkbox"/> Yes. Describe..... <hr/>				
44. Any business-related property you did not already list				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Give specific information				
 <hr/> <hr/> <hr/> <hr/> <hr/>				
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here				
 <hr/>				
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.				
If you own or have an interest in farmland, list it in Part 1.				
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?				
<input checked="" type="checkbox"/> No. Go to Part 7.				
<input type="checkbox"/> Yes. Go to line 47.				
Current value of the portion you own? Do not deduct secured claims or exemptions				
47. Farm animals				
Examples: Livestock, poultry, farm-raised fish				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Describe... <hr/>				
 <hr/>				

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
First Name Middle Name Last Name

48. Crops-either growing or harvested

No

Yes. Describe...

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No

Yes. Describe...

50. Farm and fishing supplies, chemicals, and feed

No

Yes. Describe...

51. Any farm- and commercial fishing-related property you did not already list

No

Yes. Describe...

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached
for Part 6. Write that number here ►

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

Yes. Give specific information

54. Add the dollar value of all of your entries from Part 7. Write that number here ►

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 ► \$178300.00

56. part 2 total vehicles, line 5

\$2050.00

57. Part 3: Total personal and household items, line 15

\$6770.00

58. Part 4: Total financial assets, line 36

\$8820.00

59. Part 5: Total business-related property, line 45

\$187120.00

60. Part 6: Total farm- and fishing-related property, line 52

\$187120.00

61. Part 7: Total other property not listed, line 54

\$187120.00

62. Total personal property. Add lines 56 through 61. ► \$8820.00

Copy personal property total ► \$8820.00

63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$187120.00

Fill in this information to identify your case:

Debtor 1	Cheyenne First Name	Paige Middle Name	Wiler Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of Georgia (State)	
Case number (If known)			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: <u>4317 Round Hill Drive, Chesterfield, VA 23832</u>	\$178,300.00	<input checked="" type="checkbox"/> \$4,430.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(6)
Line from Schedule A/B: 01			O.C.G.A. § 44-13-100(a)(6)
Brief description: <u>Checking account, Citizens Trust Bank</u>	\$3,500.00	<input checked="" type="checkbox"/> \$3,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(6)
Line from Schedule A/B: 17			

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Debtor 1 Cheyenne _____
First Name
Paige _____
Middle Name
Wiler _____
Last Name
Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <i>Copy the value from Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: <u>Checking account, PNC Bank</u> Line from Schedule A/B: <u>17</u>	\$20.00	<input checked="" type="checkbox"/> \$20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(6)
Brief description: <u>Cash on hand</u> Line from Schedule A/B: <u>16</u>	\$2,000.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(6)
Brief description: <u>Security deposit on rental unit, The Atlantic Vinings</u> Line from Schedule A/B: <u>22</u>	\$1,250.00	<input checked="" type="checkbox"/> \$1,250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(6)
Brief description: <u>Household Goods and Furnishings</u> Line from Schedule A/B: <u>06</u>	\$800.00	<input checked="" type="checkbox"/> \$800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(4)
Brief description: <u>Jewelry</u> Line from Schedule A/B: <u>12</u>	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(5)
Brief description: <u>Clothes and Shoes</u> Line from Schedule A/B: <u>11</u>	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(4)
Brief description: <u>Electronics</u> Line from Schedule A/B: <u>07</u>	\$250.00	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(4)

Fill in this information to identify your case:

Debtor 1	Cheyenne First Name	Paige Middle Name	Wiler Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of Georgia (State)	
Case number (If known) _____			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

	2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any	
2.1	<p>NATIONSTAR/MR. COOPER Creditor's Name 350 HIGHLAND DR Number Street</p> <p>LEWISVILLE TX 75067 City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>11/2000</u></p>	<p>Describe the property that secures the claim: 4317 Round Hill Drive, Chesterfield, VA 23832 / 360 Mortgage</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number <u>1084</u></p>	<u>\$125,454.00</u>	<u>\$178,300.00</u>	<u>\$0.00</u>
2.2	<p>Creekwood Owner Association Creditor's Name 4225 Ketcham Dr Number Street</p> <p>Chesterfield VA 23832 City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p>Describe the property that secures the claim: 4317 Round Hill Drive, Chesterfield, VA 23832 Value: <u>\$178,300.00</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>HOA arrears</u></p> <p>Last 4 digits of account number <u>4637</u></p>	<u>\$1,000.00</u>	<u>\$178,300.00</u>	<u>\$0.00</u>
	<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p> <p><u>\$126,454.00</u></p>				

Fill in this information to identify your case:

Debtor 1	Cheyenne First Name	Paige Middle Name	Wiler Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of Georgia (State)	
Case number (if known)			

 Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount	
2.1	<p>Georgia Department of Revenue Priority Creditor's Name 1800 Century Blvd Number Street Suite 17200</p> <p>Atlanta Georgia 30345 City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 4637</p> <p>When was the debt incurred? n/a</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of PRIORITY unsecured claim:</p> <p><input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____</p>	\$0.00	\$0.00	\$0.00
2.2	<p>Internal Revenue Service Priority Creditor's Name P.O. Box 7346 Number Street</p> <p>Philadelphia Pennsylvania 19101 City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 4637</p> <p>When was the debt incurred? n/a</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of PRIORITY unsecured claim:</p> <p><input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____</p>	\$0.00	\$0.00	\$0.00

Debtor 1 Cheyenne _____ Paige _____ Wiler _____ Case number (if known) _____
First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims
3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than four priority unsecured claims fill out the Continuation Page of Part 2.

	Total claim
<p>4.1 AMCA Nonpriority Creditor's Name 2269 S SAW MILL RIVER ROAD Number Street</p> <p>ELMSFORD New York 10523 City State Zip Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Last 4 digits of account number <u>1840</u> When was the debt incurred? <u>10/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Collection; Collecting for Other. Specify <u>ORIGINAL CREDITOR: MEDICAL</u>
<p>4.2 AMCA Nonpriority Creditor's Name 2269 S SAW MILL RIVER ROAD Number Street</p> <p>ELMSFORD New York 10523 City State Zip Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Last 4 digits of account number <u>4730</u> When was the debt incurred? <u>12/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Collection; Collecting for Other. Specify <u>ORIGINAL CREDITOR: MEDICAL</u>
<p>4.3 AMCA Nonpriority Creditor's Name 2269 S SAW MILL RIVER ROAD Number Street</p> <p>ELMSFORD New York 10523 City State Zip Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Last 4 digits of account number <u>2380</u> When was the debt incurred? <u>12/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Collection; Collecting for Other. Specify <u>ORIGINAL CREDITOR: MEDICAL</u>

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.					Total claim
4.4	AURORA BANK Nonpriority Creditor's Name POB 1706 Number Street SCOTTSBLUFF Nebraska 69363 City State Zip Code			Last 4 digits of account number 6311 When was the debt incurred? 11/2000 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt					Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 360 Mortgage
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
4.5	BK OF AMER Nonpriority Creditor's Name 450 AMERICAN ST Number Street SIMI VALLEY California 93065 City State Zip Code			Last 4 digits of account number 3273 When was the debt incurred? 11/2000 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt					Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 360 Mortgage
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
4.6	BRIDGECREST CREDIT Nonpriority Creditor's Name 4020 E INDIAN SCHOOL RD Number Street PHOENIX Arizona 85018 City State Zip Code			Last 4 digits of account number 8001 When was the debt incurred? 8/2016 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$19,282.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt					Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 068 Automobile
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.					Total claim	
4.7	BRIDGECREST CREDIT Nonpriority Creditor's Name 4020 E INDIAN SCHOOL RD Number Street			Last 4 digits of account number	8401	\$0.00
					When was the debt incurred?	3/2016
					As of the date you file, the claim is: Check all that apply.	
					<input type="checkbox"/> Contingent	
					<input type="checkbox"/> Unliquidated	
					<input type="checkbox"/> Disputed	
					Type of NONPRIORITY unsecured claim:	
					<input type="checkbox"/> Student loans	
					<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
					<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
					<input checked="" type="checkbox"/> Other. Specify <u>065 Automobile</u>	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt					Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
4.8	CAINE & WEINER Nonpriority Creditor's Name PO BOX 5010 Number Street			Last 4 digits of account number	6660	\$294.00
					When was the debt incurred?	6/2015
					As of the date you file, the claim is: Check all that apply.	
					<input type="checkbox"/> Contingent	
					<input type="checkbox"/> Unliquidated	
					<input type="checkbox"/> Disputed	
					Type of NONPRIORITY unsecured claim:	
					<input type="checkbox"/> Student loans	
					<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
					<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
					<input checked="" type="checkbox"/> 001 Collection; Collecting for ORIGINAL CREDITOR: Other. Specify <u>PROGRESSIVE INSURANCE</u>	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt					Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
4.9	CAPITAL ONE AUTO FINAN Nonpriority Creditor's Name 3901 DALLAS PKWY Number Street			Last 4 digits of account number	1001	\$0.00
					When was the debt incurred?	7/2008
					As of the date you file, the claim is: Check all that apply.	
					<input type="checkbox"/> Contingent	
					<input type="checkbox"/> Unliquidated	
					<input type="checkbox"/> Disputed	
					Type of NONPRIORITY unsecured claim:	
					<input type="checkbox"/> Student loans	
					<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
					<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
					<input checked="" type="checkbox"/> Other. Specify <u>074 Automobile</u>	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt					Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.10	CITIZENS TRUST BANK Nonpriority Creditor's Name 965 M.L.K. Dr NW Number Street Atlanta Georgia 30314 City State Zip Code			Last 4 digits of account number <u>0811</u>	\$0.00
				When was the debt incurred? <u>8/2011</u>	
				As of the date you file, the claim is: Check all that apply.	
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
				Type of NONPRIORITY unsecured claim:	
				<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>036 InstallmentLoan</u>	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.11	CONTRACT CALLERS INC Nonpriority Creditor's Name 501 GREENE ST FL 3 Number Street AUGUSTA Georgia 30901 City State Zip Code			Last 4 digits of account number <u>7758</u>	\$120.00
				When was the debt incurred? <u>6/2017</u>	
				As of the date you file, the claim is: Check all that apply.	
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
				Type of NONPRIORITY unsecured claim:	
				<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>001 Collection; Collecting for ORIGINAL CREDITOR: GAS SOUTH</u>	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.12	KROSS/LIEBERMAN & STON Nonpriority Creditor's Name 991 AVIATION PKWY STE 30 Number Street MORRISVILLE North Carolina 27560 City State Zip Code			Last 4 digits of account number <u>0924</u>	\$156.00
				When was the debt incurred? <u>3/2016</u>	
				As of the date you file, the claim is: Check all that apply.	
				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
				Type of NONPRIORITY unsecured claim:	
				<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>001 Collection; Collecting for ORIGINAL CREDITOR: CHILDCARE NETWORK INC</u>	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.13	<p>LVNV FUNDING LLC Nonpriority Creditor's Name P.O. Box 52815 Number Street c/o Jeremy T. McCullough Aldridge Pite Haan, LLP</p> <p>Atlanta Georgia 30355 City State Zip Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 5737</p> <p>When was the debt incurred? 1/2017</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 001 UnknownLoanType</p>	\$492.00
4.14	<p>LVNV FUNDING LLC Nonpriority Creditor's Name P.O. Box 52815 Number Street c/o Jeremy T. McCullough Aldridge Pite Haan, LLP</p> <p>Atlanta Georgia 30355 City State Zip Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 4887</p> <p>When was the debt incurred? 1/2017</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 001 UnknownLoanType</p>	\$480.00
4.15	<p>NORTH AMERCN Nonpriority Creditor's Name POB 182221 Number Street</p> <p>CHATTANOOGA Tennessee 37422 City State Zip Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 1565</p> <p>When was the debt incurred? 12/2013</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection; Collecting for ORIGINAL CREDITOR: MEDICAL</p>	\$476.00

Debtor 1 Cheyenne _____ Paige _____ Wiler _____ Case number (if known) _____
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.16	Santander Consumer USA Nonpriority Creditor's Name PO Box 961245 Number Street Attn: Francesca Johnson Fort Worth Texas 76161 City State Zip Code	Last 4 digits of account number <u>1000</u> When was the debt incurred? <u>12/2012</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>077 Automobile</u>	\$0.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.17	US DEPT OF ED/GLELSI Nonpriority Creditor's Name 2401 INTERNATIONAL LN Number Street MADISON Wisconsin 53704 City State Zip Code	Last 4 digits of account number <u>8581</u> When was the debt incurred? <u>4/2011</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <u>0000</u>	\$6,653.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.18	VERIZON Nonpriority Creditor's Name 455 Duke Drive Number Street Franklin Tennessee 37067 City State Zip Code	Last 4 digits of account number <u>0001</u> When was the debt incurred? <u>11/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>001 InstallmentLoan</u>	\$481.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Internal Revenue Service - Atl

Name _____
 401 W Peachtree St. NW, Stop 334-D
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.2 of (Check
one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Atlanta Georgia 30308
 City State Zip Code

Last 4 digits of account number 4637

Department of Justice, Tax Division

Name _____
 75 Spring Street SW
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.2 of (Check
one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Atlanta Georgia 30303
 City State Zip Code

Last 4 digits of account number 4637

Office of the United States Trustee

Name _____
 75 Ted Turner Dr Sw
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.2 of (Check
one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Atlanta Georgia 30303
 City State Zip Code

Last 4 digits of account number 4637

Special Assistant U.S. Attorney

Name _____
 401 W. Peachtree Street, NW, STOP 1000-D, Suite 600
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.2 of (Check
one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Atlanta Georgia 30308
 City State Zip Code

Last 4 digits of account number 4637

Office of the Attorney General - Atlanta

Name _____
 40 Capitol Sq Sw
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.1 of (Check
one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Atlanta Georgia 30334
 City State Zip Code

Last 4 digits of account number 4637

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
 First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159.
 Add the amounts for each type of unsecured claim.

		Total claims
Total claims from Part 1	6a. Domestic support obligations.	6a. _____ \$0.00
	6b. Taxes and certain other debts you owe the government	6b. _____ \$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. _____ \$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. _____ \$0.00
	6e. Total. Add lines 6a through 6d.	6e. _____ \$0.00
		Total claims
Total claims from Part 2	6f. Student loans	6f. _____ \$6,653.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. _____ \$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. _____ \$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. _____ \$22,682.00
	6j. Total. Add lines 6f through 6i.	6j. _____ \$29,335.00

Fill in this information to identify your case:

Debtor 1	Cheyenne	Paige	Wiler
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern	District of Georgia	
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1 The Atlantic Vinings Name 3385 Atlanta Rd SE Number Street Smyrna Georgia 30080 City State Zip Code	Residential Lease, Debtor is Lessee, Residential Lease Agreement

Fill in this information to identify your case:

Debtor 1	Cheyenne	Paige	Wiler
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern	District of Georgia	
Case number (If known)			

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

- No
 Yes. In which community state or territory did you live? _____ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State Zip Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:

Fill in this information to identify your case:

Debtor 1 First Name	Cheyenne	Middle Name	Paige	Last Name	Wiler
Debtor 2 (Spouse, if filing) First Name		Middle Name		Last Name	
United States Bankruptcy Court for the: Case number (If known)	Northern	District of Georgia (State)			

Check if this is:

An amended filing

A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not Employed
Occupation	Bartender	
Employer's name	Levy Premium Foodservice Limited	
Employer's address	980 North Michigan Avenue #400 Number Street	
	Chicago	Illinois
	City	State
	60611 Zip Code	
How long employed there?	2 months	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.
3. Estimate and list monthly overtime pay.
4. Calculate gross income. Add line 2 + line 3.

For Debtor 1	For Debtor 2 or non-filing spouse
2. \$1,308.17	
3. + \$0.00	
4. \$1,308.17	

Debtor 1 First Name	Paige Middle Name	Wiler Last Name	Case number (if known)	
			For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here		→ 4.	\$1,308.17	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$166.90		
5b. Mandatory contributions for retirement plans	5b.	\$0.00		
5c. Voluntary contributions for retirement plans	5c.	\$0.00		
5d. Required repayments of retirement fund loans	5d.	\$0.00		
5e. Insurance	5e.	\$0.00		
5f. Domestic support obligations	5f.	\$0.00		
5g. Union dues	5g.	\$0.00		
5h. Other deductions. Specify: _____	5h. +	\$0.00	+ _____	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$166.90		
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$1,141.27		
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm <small>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.</small>	8a.	\$1,350.00		
8b. Interest and dividends	8b.	\$0.00		
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive <small>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.</small>	8c.	\$1,000.00		
8d. Unemployment compensation	8d.	\$0.00		
8e. Social Security	8e.	\$0.00		
8f. Other government assistance that you regularly receive <small>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: _____</small>	8f.	\$0.00		
8g. Pension or retirement income	8g.	\$0.00		
8h. Other monthly income. Specify: _____	8h. +	\$0.00	+ _____	
9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$2,350.00		
10. Calculate monthly income. Add line 7 + line 9. <small>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse</small>	10.	\$3,491.27	=	\$3,491.27
11. State all other regular contributions to the expenses that you list in Schedule J. <small>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____</small>				
11. + \$0.00				
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. <small>Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies</small>				
12. _____ \$3,491.27				
Combined monthly income				
13. Do you expect an increase or decrease within the year after you file this form?				
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____				

Debtor 1 Cheyenne _____
First Name _____
Paige _____
Middle Name _____
Wiler _____
Last Name _____
Case number (if
known) _____

Official Form 106I. Additional page.

8a. Net income from rental property and from operating a business, profession, or farm

8a.1 4317 Round Hill Drive, Chesterfield, VA

Debtor 1 Debtor 2

Gross receipts (before all deductions)	\$1,350.00	_____
Ordinary and necessary operating expenses	-\$0.00	-
Net monthly income from a business, profession, or farm	\$1,350.00	_____

**Copy
here**
→

\$1,350.00

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
	Cheyenne	Paige	Wiler
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern	District of	Georgia (State)
Case number (If known)			

Check if this is:

- An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Forms 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2.	<input checked="" type="checkbox"/> Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		Child	6 years	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
		Child	20 years	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4.

Your expenses

\$1,200.00

4.

If not included in line 4:

4a. Real estate taxes	4a	\$0.00
4b. Property, homeowner's, or renter's insurance	4b.	\$18.00
4c. Home maintenance, repair, and upkeep expenses	4c.	\$0.00
4d. Homeowner's association or condominium dues	4d.	\$58.00

Debtor 1	Cheyenne First Name	Paige Middle Name	Wiler Last Name	Case number (if known)	
Your expenses					
5.	Additional mortgage payments for your residence, such as home equity loans				5. <u>\$0.00</u>
6.	Utilities:				
6a.	Electricity, heat, natural gas				6a. <u>\$100.00</u>
6b.	Water, sewer, garbage collection				6b. <u>\$0.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services				6c. <u>\$72.00</u>
6d.	Other. Specify: _____				6d. <u>\$0.00</u>
7.	Food and housekeeping supplies				7. <u>\$200.00</u>
8.	Childcare and children's education costs				8. <u>\$0.00</u>
9.	Clothing, laundry, and dry cleaning				9. <u>\$10.00</u>
10.	Personal care products and services				10. <u>\$10.00</u>
11.	Medical and dental expenses				11. <u>\$0.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments				12. <u>\$100.00</u>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books				13. <u>\$0.00</u>
14.	Charitable contributions and religious donations				14. <u>\$0.00</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.				
15a.	Life insurance				15a. <u>\$0.00</u>
15b.	Health insurance				15b. <u>\$0.00</u>
15c.	Vehicle insurance				15c. <u>\$0.00</u>
15d.	Other insurance. Specify: _____				15d. <u>\$0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____				16. <u>\$0.00</u>
17.	Installment or lease payments:				
17a.	Car payments for Vehicle 1				17a. <u>\$0.00</u>
17b.	Car payments for Vehicle 2				17b. <u>\$0.00</u>
17c.	Other. Specify: _____				17c. <u>\$0.00</u>
17d.	Other. Specify: _____				17d. <u>\$0.00</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).				18. <u>\$0.00</u>
19.	Other payments you make to support others who do not live with you. Specify: _____				19. <u>\$0.00</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.				
20a.	Mortgages on other property				20a. <u>\$1,008.00</u>
20b.	Real estate taxes.				20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance				20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses.				20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues				20e. <u>\$0.00</u>

Debtor 1 Cheyenne Paige Wiler Case number (if known) _____
First Name Middle Name Last Name

21. Other. Specify: _____ 21 _____ \$0.00

22. Calculate your monthly expenses.

- 22a. Add lines 4 through 21.
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2
22c. Add line 22a and 22b. The result is your monthly expenses.

22. _____ \$2,776.00
\$0.00
\$2,776.00

23. Calculate your monthly net income.

- 23a. Copy line 12 (your combined monthly income) from Schedule I.
23b. Copy your monthly expenses from line 22 above.
23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income.

23a _____ \$3,491.27
23b _____ \$2,776.00
23c _____ \$715.27

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No

Yes

Explain here:

Fill in this information to identify your case:

Debtor 1	Cheyenne	Paige	Wiler
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of Georgia (State)	
Case number (If known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets Value of what you own	
1. Schedule A/B: Property (Official Form 106A/B)	\$178,300.00
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$178,300.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$8,820.00
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$187,120.00

Part 2: Summarize Your Liabilities

Your liabilities Amount you owe	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$126,454.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$126,454.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$29,335.00
Your total liabilities	\$155,789.00

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	\$3,491.27
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$3,491.27
5. Schedule J: Your Expenses (Official Form 106J)	\$2,776.00
Copy your monthly expenses from line 22, Column A, of <i>Schedule J</i>	\$2,776.00

Debtor 1 Cheyenne _____ Paige _____ Wiler _____ Case number (if known) _____
First Name Middle Name Last Name

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes.

7. What kind of debt do you have?

- Your debts are primarily consumer debts.** Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$2,670.14

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$6,653.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00
9g. Total. Add lines 9a through 9f.	\$6,653.00

Fill in this information to identify your case:

Debtor 1	Cheyenne	Paige	Wiler
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of Georgia (State)	
Case number (If known) _____			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Cheyenne Wiler

Signature of Debtor 1

Date 10/24/2017
MM/DD/YYYY

X

Signature of Debtor 2

Date
MM/DD/YYYY

UNITED STATES BANKRUPTCY COURT
Northern District of Georgia

In re:

Wiler, Cheyenne Paige

Debtor(s)

Case No.

Chapter.

Chapter13

VERIFICATION OF CREDITOR MATRIX

The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:

10/24/2017

/s/ Wiler, Cheyenne Paige

Wiler, Cheyenne Paige

Signature of Debtor

NATIONSTAR/MR. COOPER
350 HIGHLAND DR
LEWISVILLE, TX, 75067

BRIDGECREST CREDIT
4020 E INDIAN SCHOOL RD
PHOENIX, AZ, 85018

US DEPT OF ED/GLELSI
2401 Internal Lane
Attn: Chhengre Lim
Madison, WI, 53704

AMCA
Po Box 1235
Elmsford, NY, 10523

LVNV FUNDING LLC
PO Box 10587
Greenville, SC, 29603

VERIZON
455 Duke Drive
Franklin, TN, 37067

NORTH AMERCN
POB 182221
CHATTANOOGA, TN, 37422

CAINE & WEINER
21210 Erwin St
Woodland Hls, CA, 91367

KROSS/LIEBERMAN & STON
991 AVIATION PKWY STE 30
MORRISVILLE, NC, 27560

CONTRACT CALLERS INC
501 GREENE ST FL 3
AUGUSTA, GA, 30901

CITIZENS TRUST BANK
965 M.L.K. Dr NW
Atlanta, GA, 30314

Santander Consumer USA
ATT POC: Janiscia Jackson PO Box 961245
Fort Worth, TX, 76161

BK OF AMER
450 AMERICAN ST
SIMI VALLEY, CA, 93065

CAPITAL ONE AUTO FINAN
3901 DALLAS PKWY
PLANO, TX, 75093

AURORA BANK
POB 1706
SCOTTSBLUFF, NE, 69363

Internal Revenue Service
PO Box 7346
Philadelphia, PA, 19101

Internal Revenue Service - Atl
401 W Peachtree St NW M/S 334D
Atlanta, GA, 30308

Department of Justice, Tax Division
75 Spring Street SW
Civil Trial Section, Southern
Atlanta, GA, 30303

Office of the United States Trustee
75 Ted Turner Dr Sw
Atlanta, GA, 30303

Special Assistant U.S. Attorney
401 W. Peachtree Street, NW, STOP 1000-D, Suite 600
Atlanta, GA, 30308

Georgia Department of Revenue
1800 Century Boulevard
c/o T Truong
Atlanta, GA, 30345

Office of the Attorney General - Atlanta
40 Capitol Sq Sw
Attn: Karrollanne K. Cayce
Atlanta, GA, 30334

Creekwood Owner Association
4225 Ketcham Dr
Chesterfield, VA, 23832

The Atlantic Vinings
3385 Atlanta Rd SE
Smyrna, GA, 30080

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- **You are an individual filing for bankruptcy,**
and
- **Your debts are primarily consumer debts.**

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 — Liquidation
- Chapter 11 — Reorganization
- Chapter 12 — Voluntary repayment plan for family farmers or fishermen
- Chapter 13 — Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$245	filing fee
\$75	administrative fee
+	
\$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filing fee
+ \$550	administrative fee
<hr/>	
\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+ \$75	administrative fee
\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+ \$75	administrative fee
\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:
http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury - either orally or in writing - in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:
http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit20AndDebtCounselors.aspx>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this information to identify your case:

Debtor 1	Cheyenne	Paige	Wiler
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern	District of	Georgia (State)
Case number (if known)			

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

- 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- 3. The commitment period is 3 years.
- 4. The commitment period is 5 years.

Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

- Not married. Fill out Column A, lines 2-11.
- Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).

Column A
Debtor 1

\$270.14

Column B
Debtor 2

3. Alimony and maintenance payments. Do not include payments from a spouse.

\$0.00

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.

\$1,050.00

5. Net income from operating a business, profession, or farm

Debtor 1 Debtor 2

Gross receipts (before all deductions)

\$0.00

Ordinary and necessary operating expenses

-\$0.00

Net monthly income from a business, profession, or farm

\$0.00

Copy here→ \$0.00

6. Net income from rental and other real property

Debtor 1 Debtor 2

Gross receipts (before all deductions)

\$1,350.00

Ordinary and necessary operating expenses

-\$0.00

Net monthly income from a business, profession, or farm

\$1,350.00

Copy here→ \$1,350.00

Debtor 1 Cheyenne **Case number (if known)** _____
First Name Middle Name Last Name

	Column A Debtor 1	Column B Debtor 2		
7. Interest, dividends, and royalties	<u>\$0.00</u>	<u> </u>		
8. Unemployment compensation	<u>\$0.00</u>	<u> </u>		
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: _____				
For you	<u>\$0.00</u>	<u> </u>		
For your spouse	<u> </u>	<u> </u>		
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	<u>\$0.00</u>	<u> </u>		
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism.				
If necessary, list other sources on a separate page and put the total below.				
<hr/> <hr/> <hr/>				
Total amounts from separate pages, if any.	<u>+\$0.00</u>	<u>+\$0.00</u>		
11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	<u>\$2,670.14</u>	+	<u>\$0.00</u>	<u>\$2,670.14</u>
	Total current monthly income			
Part 2: Determine How to Measure Your Deductions from Income				
12. Copy your total average monthly income from line 11.	<u>\$2,670.14</u>			
13. Calculate the marital adjustment. Check one:				
<input checked="" type="checkbox"/> You are not married. Fill in 0 below.				
<input type="checkbox"/> You are married and your spouse is filing with you. Fill in 0 below.				
<input type="checkbox"/> You are married and your spouse is not filing with you.				
Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.				
Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.				
If this adjustment does not apply, enter 0 below.				
<hr/> <hr/> <hr/>			<hr/> <hr/> <hr/>	
Total	<u> </u>	<u> </u>	<u>+\$0.00</u>	Copy here →
			<u> </u>	<u>-\$0.00</u>
14. Your current monthly income. Subtract the total in line 13 from line 12.	<u>\$2,670.14</u>			
15. Calculate your current monthly income for the year. Follow these steps:				
15a. Copy line 14 here →	<u>\$2,670.14</u>			
Multiply line 15a by 12 (the number of months in a year).				
15b. The result is your current monthly income for the year for this part of the form.	<u>\$32,041.68</u>			

Debtor 1 Cheyenne First Name	Paige Middle Name	Wiler Last Name	Case number (if known)
---------------------------------	----------------------	--------------------	------------------------

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. Georgia

16b. Fill in the number of people in your household. 3

16c. Fill in the median family income for your state and size of household \$62,483.00
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Disposable Income* (Official Form 122C-2).

17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)

18. Copy your total average monthly income from line 11. \$2,670.14

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. -\$0.00

19b. Subtract line 19a from line 18. \$2,670.14

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b. \$2,670.14

Multiply by 12 (the number of months in a year). x 12

20b. The result is your current monthly income for the year for this part of the form. \$32,041.68

20c. Copy the median family income for your state and size of household from line 16c. \$62,483.00

21. How do the lines compare?

Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Cheyenne Wiler

Signature of Debtor 1

Date 10/24/2017
MM/DD/YYYY

X

Signature of Debtor 2

Date
MM/DD/YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

UNITED STATES BANKRUPTCY COURT
Northern District of Georgia

In re _____
Debtor _____

Case No. _____
(If known)
Chapter _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept _____

Prior to the filing of this statement I have received _____

Balance Due _____

2. \$310.00 filing fee was incurred on behalf of the debtor. In addition to the attorney fees, Semrad Law Firm seeks an additional \$310.00 for the filing fee paid on behalf of the Debtor.

3. The source of the compensation paid to me was:

Debtor Other (specify) _____

4. The source of the compensation paid to me is:

Debtor Other (specify) _____

5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. The debtor authorizes and directs the trustee to pay up to \$2000.00 of the above balance due for attorney's fees and any unpaid advanced cost in the event the case is dismissed or converted prior to confirmation of the plan. The debtor authorizes and directs the trustee to pay any funds on hand towards the above balance if the case is dismissed or converted after confirmation of the plan.

7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Post-Confirmation Plan Modification \$500.00

Motion to Excuse Plan Payments \$500.00

Defending Post Confirmation Motions to Modify the Stay: No insurance or default in plan terms \$300.00;

Payment disputes \$500.00

Motion to Sell Property - \$500.00,

Application to Employ Professional/Motion to Approve Compromise/Retain Proceeds - \$500.00

Motion to Incur Debt/Refinance/Approve Loan Modification - \$500.00

Motion to Reimpose Stay - \$500.00, Trustee's motion to dismiss(post bar review) -\$300.00

Motion to Vacate Dismissal/Reopen Case - \$500.00 plus cost.

Motion to Retain Tax Refund - \$500.00, Letter to Retain Tax Refund - \$250.00,

Post-Bar Review Objection to Claim \$300.00,

Objection to Fees per rule 3002.1- \$300/Hr,

Motion for Damages/Stay Violation \$300.00/Hr

Adversary Proceeding - \$300.00/Hr,

Appellate Practice - \$300.00/Hr,

Services after Conversion to Chapter 7

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.

Pursuant to General Order No. 18-2015, I certify that I provided to the debtor(s) a copy of the "Rights and Responsibilities Statement Between Chapter 13 Debtors and Their Attorneys."

Date

Signature of Attorney

Name of law firm